

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-387)							SERIAL NO.		FILING DATE			
							APPLICANT(S)					
							CLAIMS					
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
NO.	DEF.	NO.	DEF.	NO.	DEF.		NO.	DEF.	NO.	DEF.	NO.	DEF.
1							61					
2							62					
3							63					
4							64					
5							65					
6							66					
7							67					
8							68					
9							69					
10							70					
11							71					
12							72					
13							73					
14							74					
15							75					
16							76					
17							77					
18							78					
19							79					
20							80					
21							81					
22							82					
23							83					
24							84					
25							85					
26							86					
27							87					
28							88					
29							89					
30							90					
31							91					
32							92					
33							93					
34							94					
35							95					
36							96					
37							97					
38							98					
39							99					
40							100					
41												
42												
43												
44												
45												
46												
47												
48												
49												
50												
TOTAL NO.	3						TOTAL NO.					
TOTAL DEF.	17						TOTAL DEF.					
TOTAL	20						TOTAL					

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

(FOR USE WITH FORM 1000)							CLAIMS						
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT									
NO.	DEF.	NO.	DEF.	NO.	DEF.			NO.	DEF.	NO.	DEF.		
1								61					
2								62					
3								63					
4								64					
5								65					
6								66					
7								67					
8								68					
9								69					
10								70					
11								71					
12								72					
13								73					
14								74					
15								75					
16								76					
17								77					
18								78					
19								79					
20								80					
21								81					
22								82					
23								83					
24								84					
25								85					
26								86					
27								87					
28								88					
29								89					
30								90					
31								91					
32								92					
33								93					
34								94					
35								95					
36								96					
37								97					
38								98					
39								99					
40								100					
41								TOTAL					
42								NO.					
43								TOTAL					
44								DEF.					
45								TOTAL					
46								NO.					
47								TOTAL					
48								DEF.					
49								TOTAL					
50								NO.					
TOTAL	3							TOTAL					
NO.	17							DEF.					
TOTAL	20							TOTAL					
DEF.								NO.					